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**FACSIMILE TRANSMITTAL SHEET**

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TO:	FROM:
Examiner Alison K. Pickard	Stanley B. Baker
Group Art Unit 3676	
COMPANY:	DATE:
PTO	9/12/02
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
703-872-9326	2
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
703-305-0882	1246.1
RE:	YOUR REFERENCE NUMBER:
Cedrone	
U.S. Serial No. 09/780,306	
Filed 2/9/01	

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☐ URGENT    ☐ FOR REVIEW    ☐ PLEASE COMMENT    ☐ PLEASE REPLY    ☐ PLEASE RECYCLE

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NOTES/COMMENTS:

**Request for Correction under 37 CFR 1.221(b)**

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Attorney Docket No. 1246.1  
Confirmation No. 6764

**PATENT**

UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: Codrone  
Serial No. 09/780,306  
Filed: 02/09/2001  
For: GRAVITY HINGE

Group Art Unit: 3676  
Examiner: Pickard

September 12, 2002

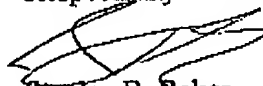
Box Non-Fee Amendment  
Assistant Commissioner for Patents  
Washington, DC 20231

**REQUEST FOR CORRECTION UNDER 37 CFR 1.221(b)**

Sir:

On August 29, 2002, the Patent Office published Patent Application Publication U.S.-2002-0116788 A1. This document incorrectly identified the inventor as Daniel Pompei. "Pompei" is the inventor's middle name. The inventor's full name is Daniel Pompei Codrone. The inventor was identified by his full name on the filing documents accompanying the application (e.g., PTO/SB/05 (11-00); PTO/SB/17 (11-00)). Please make the necessary corrections to U.S.-2002-0116788.

Respectfully submitted,

  
Stanley B. Baker  
Reg. No. 35,058

Official

**FAX RECEIVED**

**SEP 13 2002**

**GROUP 3600**

021176  
Summa & Allan, P.A.  
11610 North Community House Road  
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Charlotte, NC 28277-2162  
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**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this correspondence is being transmitted by facsimile to the Assistant Commissioner for Patents to the attention of Examiner Alison K. Pickard at Fax No. 703-872-9326 on September 12, 2002.

Date

9/12/02

  
Stanley B. Baker



**SUMMA &  
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Receipt

### FACSIMILE TRANSMITTAL SHEET

TO: OIPE, Customer Service

FROM: Stanley B. Baker

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9/12/02

FAX NUMBER:  
703-308-2840

TOTAL NO. OF PAGES INCLUDING COVER:  
6

PHONE NUMBER:  
703-308-1202

SENDER'S REFERENCE NUMBER:  
1246.1

RE: Cedrone  
U.S. Serial No. 09/780,306  
Filed 2/9/01

YOUR REFERENCE NUMBER:

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

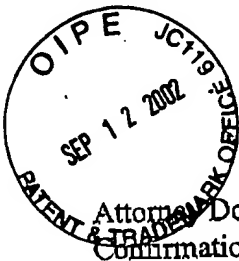
#### NOTES/COMMENTS:

- Request for Corrected Filing Receipt
- Copy of Official Filing Receipt marked with requested change
- Copy of Declaration

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OCT 08 2002  
**GROUP 3600**

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Attorney Docket No. 1246.1  
Confirmation No. 6764

PATENT

**UNITED STATES PATENT AND TRADEMARK OFFICE**

Inventor: Ccdrono  
Serial No. 09/780,306  
Filed: 02/09/2001  
For: GRAVITY HINGE

Group Art Unit: 3676  
Examiner: Pickard

September 12, 2002

Application Processing Division  
Customer Correction Branch  
Assistant Commissioner for Patents  
Washington, DC 20231

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**REQUEST FOR CORRECTED FILING RECEIPT**

**GROUP 3600**

Dear Sir:

Enclosed is a copy of the Official Filing Receipt issued for the above application. Please note the change thereon and issue a corrected filing receipt to correctly reflect the inventor's name—Daniel Pompei CEDRONE—as indicated on the Declaration (copy enclosed).

Respectfully submitted,

Stanley B. Baker  
Reg. No. 35,058

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**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this correspondence is being transmitted by facsimile to the Assistant Commissioner for Patents, Office of Initial Patent Examination, Customer Service, Fax No. 703-308-2840 on September 12, 2002.

9/12/02  
Date

  
Stanley B. Baker

## UNITED STATES PATENT AND TRADEMARK OFFICE

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/780,306	02/09/2001	3626	526	1248.1	3	39	3

CONFIRMATION NO. 6764

021176  
PHILIP SUMMA PATENT ATTORNEY  
SUITE 315  
13777 BALLANTYNE CORPORATE PLACE  
CHARLOTTE, NC 28277

## FILING RECEIPT

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MAR 26 2001

Docket	<input checked="" type="checkbox"/>
C.B.	<input checked="" type="checkbox"/>
StaRpt	<input checked="" type="checkbox"/>

PHILIP SUMMA P.A.

Date Mailed: 03/16/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) *Cedrone*  
Daniel Pompei, Huntersville, NC;

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 03/16/2001

Projected Publication Date: 08/15/2002

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*

Title

Gravity hinge

Preliminary Class

016

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GROUP 3600

Data entry by : ASRAT, FANAYE

**Team : OIPE**

**Date:** 03/16/2001





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Bib Data Sheet

CONFIRMATION NO. 6764

<b>SERIAL NUMBER</b> 09/780,306	<b>FILING DATE</b> 02/09/2001 <b>RULE</b>	<b>CLASS</b> 016	<b>GROUP ART UNIT</b> 3676	<b>ATTORNEY DOCKET NO.</b> 1246.1
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**APPLICANTS**

Daniel Pompci Cedrone, Huntersville, NC;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> NC	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 39	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

021176

**TITLE**

Gravity hinge

<b>FILING FEE RECEIVED</b> 526	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
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		<input type="checkbox"/> 1.18 Fees ( Issue )
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